FORM D ·

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



## FORM D

OMB Number: 3235-0076
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# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| SEC USE ONLY  Prefix Serial |         |  |  |  |  |  |
|-----------------------------|---------|--|--|--|--|--|
| Prefix                      | Serial  |  |  |  |  |  |
| DATE R                      | ECEIVED |  |  |  |  |  |

|   |                                       | 1321                       | 657               |  |   |
|---|---------------------------------------|----------------------------|-------------------|--|---|
| Name of Offering ( check if this is   | an amendment and name has chan        | ged, and indicate chang    | e.)               |  |   |
| Avalon Parkway Partners - II, L   | LC: Units of Class A Mem              | bership Interests in       | a Limited Liabili | ty Company   |   |
| Filing Under (Check box(es) that apply  | r):                                   | ☐ Rule 505                 | □ Rule 506        | ☐ Section 4(6)   | □ yŁoe 🌏                                |
| Type of Filing:   |                                       | New Filing                 |                   | ☐Amendment   | A CHARLENED CON                         |
|   | A. BASI                               | IC IDENTIFICATION          | DATA              |  | K W                                     |
| 1. Enter the information requested al   | oout the issuer                       |                            |                   |  | <u>00_uno</u> E                         |
| Name of Issuer ( check if this is an  | amendment and name has changed        | l, and indicate change.)   |                   | The state of the s | MAK & & ZOOO                            |
| Avalon Parkway Partners - II, I   | LC                                    |                            |                   | •  | Ya.                                     |
| Address of Executive Offices  | (Number and St                        | reet, City, State, Zip Co  | de) Telephone Nur | nber (Including Area Code  | ( 150 / 65 / C                          |
| C/o First Keystone Property Group   | , P. O. Box 2, 709 Forest Grov        | e Road, Wycombe, P         | A 18980           | (215) 598-3000   |   |
| Address of Principal Business Operation (if different from Executive Offices) | ns (Number and Street, City, State    | e, Zip Code)               | Telephone Nur     | nber (Including Area Code  | )                                       |
| Same as Executive Offices   |                                       |                            |                   | (215) 598-3000   |   |
| Brief Description of Business The Issuer was organized to design, con         | nstruct, lease and operate a shopping | ng center in Avalon, NJ    |                   |  | PROCESSE                                |
| Type of Business Organization   |                                       |                            |                   |  | 0 |
| corporation   | ☐limited partnership, alread          | ly formed                  | other (please spe | ecify): limited liability con  | mpany MAR 2 5 2005                      |
| □ business trust  | ☐ limited partnership, to be t        | formed                     |                   |  | 1060-014 G G G G G                      |
| Actual or Estimated Date of Incorporat  | ion or Organization:                  | Month<br>01                | <u>Year</u><br>05 | ⊠ Actual [   | THOWSON  EINANCIAL                      |
| Jurisdiction of Incorporation or Organia                                      | zation: (Enter two-letter U.S. P      | ostal Service abbreviation | on for State: NJ  | <del></del>  |   |

#### **GENERAL INSTRUCTIONS**

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

| Check<br>Box(es) that<br>Apply: | Promoter                     | ☐ Beneficial Owner             | ☐Executive Officer                    | Director              | Manager of the Issuer |
|---------------------------------|------------------------------|--------------------------------|---------------------------------------|-----------------------|-----------------------|
| Full Name (Last                 | name first, if individual)   |                                | · · · · · · · · · · · · · · · · · · · |                       |                       |
| First Keystone P                | roperty Group of Texas, L.P. |                                |                                       |                       |                       |
|                                 | `                            |                                |                                       |                       |                       |
| 709 Forest Grov                 |                              |                                |                                       |                       |                       |
| Check                           | ☐ Promoter                   | ☐ Beneficial Owner             | Executive Officer                     | Director              | Manager of the Issuer |
| ` '                             |                              |                                |                                       |                       |                       |
|                                 | 2 12 11 11                   |                                | ****                                  |                       |                       |
| ,                               |                              |                                |                                       |                       |                       |
|                                 |                              | St                             |                                       |                       |                       |
|                                 | `                            |                                |                                       |                       |                       |
|                                 |                              |                                | N 2                                   | <u> </u>              |                       |
|                                 | ☐ Promoter                   | ∠ Beneficial Owner of a        |                                       | ☐ Director            |                       |
| mat Apply.                      |                              | Manager of the Issuer          | Manager of the Issuer                 |                       | Managing Partner      |
| Full Name (Last                 | name first, if individual)   |                                |                                       | II. ******            |                       |
| Price, Jeffrey                  |                              |                                |                                       |                       |                       |
| Business or Res                 | dence Address (Number and S  | Street, City, State, Zip Code) |                                       |                       |                       |
| 709 Forest Grov                 | e Road, Wycombe, PA 18980    |                                |                                       |                       |                       |
| Check Boxes                     | ☐ Promoter                   | Beneficial Owner of a          | Executive Officer of a                | Director of a         | ☐ General and/or      |
| that Apply:                     |                              | Manager of the Issuer          | Manager of the Issuer                 | Manager of the Issuer | Managing Partner      |
| Full Name (Last                 | name first, if individual)   |                                |                                       |                       |                       |
| Mainka, Albert                  |                              |                                |                                       |                       |                       |
| Business or Res                 | dence Address (Number and S  | Street, City, State, Zip Code) |                                       |                       |                       |
| 533 Fellowship                  | Dockes   that   topply:      |                                |                                       |                       |                       |
| Check Boxes                     | ☐ Promoter                   | Beneficial E                   | xecutive Officer of the Issuer        | Director of the       | ☐ General and/or      |
| that Apply:                     |                              | Owner of the Issuer            |                                       | Issuer                | Managing Partner      |
| Full Name (Last                 | name first, if individual)   | ·                              |                                       |                       |                       |
|                                 | ·                            |                                |                                       |                       |                       |
| Business or Res                 | dence Address (Number and S  | Street, City, State, Zip Code) |                                       |                       |                       |

|           | B. INFORMATION ABOUT OFFERING  |
|-----------|--|
| 1.        | Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  |
| 2.<br>*Le | What is the minimum investment that will be accepted from any individual?  |
| 3.        | Does the offering permit joint ownership of a single unit?   |
| 4.        | Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  NONE |
|           | Full Name (Last name first, if individual)   |
| ·····     | Business or Residence Address (Number and Street, City, State, Zip Code)   |
|           | States in Which Person Listed Has Solicited or Intends to Solicit  |
|           | (Check "All States" or check individual States).   |

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box 🗵 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt..... 0.00 Equity..... 0.00 0.00 ☐ Preferred Common Convertible Securities (including warrants)......\$ 0.00 0.00

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

Other: Units of Class A Membership Interests in a Limited Liability

Partnership Interests

Company

Total .....

|   | Number      | Aggregate      |
|---|-------------|----------------|
|   | of Purchase | Dollar Amount  |
|   |             | of Purchases   |
| Accredited Investors                    | 32          | \$1,500,000.00 |
| Non-accredited Investors                | 0           | \$0.00         |
| Total (for filings under Rule 504 only) |             | \$             |

\$ \_\_\_1,500,000.00

\$ 1,500,000.00

0.00

\$ \_\_\_\_\_1,500,000.00

\$ \_\_\_\_1,500,000.00

Answer also in Appendix, Column 4, if filing under ULOE.

. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.

Not Applicable

|   | Type of  | Dollar Amount |
|---|----------|---------------|
|   | Security | Sold          |
| Type of Offering  |          |               |
| Rule 505  |          | \$            |
| Regulation A  |          | \$            |
| Rule 504  |          | \$            |
| Total   |          | \$            |
| a ctatement of all expanses in connection with the issuance and distribution of the |          |               |

a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

| Transfer Agent's Fees  |             | \$<br>\$<br>\$ | 2,000.00<br>40,000.00 |
|--|-------------|----------------|-----------------------|
| Accounting and Consulting Fees  Engineering Fees  Sales Commissions (specify finders' fees separately) |             | \$<br>\$<br>\$ | 0.00<br>0.00<br>0.00  |
| Other Expense (Identify) (Postage for offering documents)  | $\boxtimes$ | \$<br>\$       | 500.00<br>42,500.00   |

| <ul> <li>Enter the difference between the aggregate offering price given in rein response to Part C – Question 4.a. This difference is the "adjusted of the control of the</li></ul> |   |             |                   | $\boxtimes$       | \$1,457,500.00 |
|---|---|-------------|-------------------|-------------------|----------------|
| 5. Indicate below the amount of the adjusted gross proceeds to the issuer use If the amount for any purpose is not known, furnish an estimate and payments listed must equal the adjusted gross proceeds to the issuer set in   | check the box to the left of the  | estimate.   | The total of the  |                   |                |
|   |   | Payme       | ent to Officers,  | P                 | ayment To      |
|   |   |             | ors, & Affiliates |                   | Others         |
| Salaries and fees   |   | <b>⊠</b> \$ |                   | □ \$ <u></u>      |                |
| Purchase of real estate   |   |             | 1,000,000.001     |                   | 377,50000      |
| Purchase, rental or leasing and installation of machinery and equipment   |   |             | 0.00              | □ <b>\$</b>       |                |
| Construction or leasing of plant buildings and facilities   |   | □ \$        | 0.00              | □ s               | 0.00           |
| Acquisition of other businesses (including the value of securities involved in in exchange for the assets or securities of another issuer pursuant to a merger)   |   | □ s         | 0.00              | □ s               | 0.00           |
| Repayment of indebtedness   |   | □ <b>\$</b> | 0,00              | □ s               | 0.00           |
| Working capital   |   | □ s         | 0.00              | □ \$              | 0.00           |
| Other (specify):  |   | <b></b>     | 0.00              | □ \$              | 0.00           |
|   |   | □\$         |                   | □ \$              |                |
| Column Totals   |   | □\$         | 0.00              | □\$ <u> </u>      | 0.00           |
| Total Payments Listed (column totals added)   |   | ⊠\$1,08     | 30,000.00         | \$ <u>377,500</u> | <u>-</u>       |
| D. FED  | ERAL SIGNATURE  |             |                   |                   |                |
| The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange (non-accredited investor pursuant to paragraph (b)(2) of Rule 502.  |   |             |                   |                   |                |
| Issuer (Print or Type)  | Signature   |             |                   | Date              |                |
| Avalon Parkway Partners - II, LLC.  | XI  |             |                   | March 14          | 1, 2005        |
| Name of Signer (Print or Type)  | Title of Signer (Print or Type)   |             |                   |                   |                |
| Jeffrey P. Price  | Avalon Parkway Partners - I<br>By: First Keystone Property<br>By: KPG, LLC, General Pa<br>By: Jeffrey P. Price, Preside | Group of I  |                   | anager            |                |
|   |   |             |                   |                   |                |
|   |   |             |                   |                   |                |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| Δ | TTI | TN' | TIC | IN |
|---|-----|-----|-----|----|

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

<sup>&</sup>lt;sup>1</sup> The Partners of APP-I are contributing their interest in the Option in exchange for interests in APP-II.

#### E. STATE SIGNATURE

Is any party described in 17 CFR 230.262 presently subject to any of 1. the disqualification provisions of such rule?..... No

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| Issuer (Print or Type) Avalon Parkway Partners - II, LLC. | Signature   | Date March 14, 2005 |
|---|---|---------------------|
| Name of Signer (Print or Type) Jeffrey P. Price           | Title of Signet (Print or Type)  Avalon/Parkway Partners - II, LLC  By: First Keystone Property Group of Tex  By: KPG, LLC, General Partner of Manag  By: Jeffrey P. Price, President |                     |

Instruction:
Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Appendix 1 2 3 4 5 Type of security and aggregate Type of investor and amount purchased in state Disqualification under state Intend to sell to (Part C - Item 2) ULOE (if yes, non-accredited offering price offered in state (Part C - Item 1) investors in State explanation of waiver ({Part B - Item granted) (Part E - Item 1) 1) No State Yes \$1,500,000 of Units of Limited Non-Number of Number of Liability Company Interest Accredited accredited Investors investors Amount Amount Yes No AL AK AZ AR CA x \$30,000 0 0 x same CO CT DE DC FL 0 3 \$67,500 0 х same GA HI ID IL \$15,000 x same 0 0 x IN IA KS \$45,000 0 0 x same х KY LA ME MD MA \$90,000 0 0 x same х MI MN MS MO MT

NE

| 1 .   |     |  |   |                                      |  | ased in state                          | Disqualification under state ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1) |     |  |  |
|-------|-----|--|---|--------------------------------------|--|--|--|-----|--|--|
| State | Yes | No   | \$1,500,000 of Units of Limited<br>Liability Company Interest | Number of<br>Accredited<br>investors | Amount   | Number of Non-<br>accredited Investors | Amount   | Yes | No   |  |
| NH    |     | x  | same  | 2                                    | \$45,000   | 0                                      | 0  | 1 3 | x  |  |
| NJ    |     | x  | same  | 3                                    | \$247,000  | 0                                      | 0  |     | х  |  |
| NM    |     |  |   |                                      |  |  |  |     |  |  |
| NY    |     | And the state of t |   |                                      | The second secon |  |  |     |  |  |
| NC    |     | ×  | same  | 1                                    | \$15,000   | 0                                      | 0  |     | x  |  |
| ND    |     |  |   |                                      |  |  |  |     |  |  |
| ОН    |     |  |   |                                      |  |  |  |     |  |  |
| OK    |     |  |   |                                      |  |  |  |     |  |  |
| OR    |     |  |   |                                      |  |  |  |     |  |  |
| PA    |     | x  | same  | 16                                   | \$885,000  | 0                                      | 0  |     | x  |  |
| RI    |     |  |   |                                      |  |  |  |     |  |  |
| SC    |     |  |   |                                      |  |  |  |     |  |  |
| SD    |     |  |   |                                      |  |  |  |     |  |  |
| TN    |     |  |   |                                      |  |  |  |     |  |  |
| TX    |     | x  | same  | 1                                    | \$15,000   | 0                                      | 0  |     | х  |  |
| UT    |     | ***************************************  |   |                                      |  |  |  |     |  |  |
| VT    |     | x  | same  | 2                                    | \$45,000   | 0                                      | 0  |     | х  |  |
| VA    |     |  |   |                                      |  |  | **************************************   |     |  |  |
| WA    |     |  |   |                                      |  |  |  |     |  |  |
| WV    |     |  |   |                                      |  |  |  |     |  |  |
| WI    |     |  |   |                                      |  |  |  |     |  |  |
| WY    |     |  |   |                                      |  |  |  |     |  |  |
| PR    |     |  |   |                                      |  |  |  |     | variances is an all a round distributions that |  |